

NATIONAL SYNCHROTRON LIGHT SOURCE BROOKHAVEN NATIONAL LABORATORY		EDP No:	
		Rev.:	
ENGINEERING DESIGN PLAN (EDP)		Date:	
Title:			
Requested By:			To: EE <input type="checkbox"/> ME <input type="checkbox"/>
Required Schedule:		Account No.:	
ESH&Q Risk Level:		Design Review Required	Yes <input type="checkbox"/> No <input type="checkbox"/>
Distribution:			
Environmental, Safety, & Health Considerations:			
<p style="text-align: center;"><u>Design Requirements</u></p>			

Design Requirements Continued . . .

Other controlling documents/processes:

Additional items, as required (e.g. quality, performance, specification, calculation, analysis or implementation requirements, independent verification, walk down requirements, milestones, testing, or design review requirements).

Assigned Engineer:

Date:

APPROVALS

Requestor:

Date:

Requesting Sect. Head:

Date:

Engineering Sect. Head/designee:

Date:

ES&H (as appropriate):

Date:

Quality Assurance (A1 Only):

Date:

☐ Data Sheets Attached